

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

35.C11922 DIV. II

First Named Inventor or Application Identifier

MITSUTOSHI HASEGAWA

Express Mail Label No.

J1040 09/966195 PTO
10/01/01**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

- | | | | |
|---|--|-----------------------------|--|
| 1. <input type="checkbox"/> | Fee Transmittal Form
(Submit an original, and a duplicate for fee processing) | 7. <input type="checkbox"/> | CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) |
| 2. <input type="checkbox"/> | Applicant claims small entity status.
See 37 CFR 1.27. | 8. <input type="checkbox"/> | Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary) |
| 3. <input checked="" type="checkbox"/> | Specification | Total Pages | 67 |
| 4. <input checked="" type="checkbox"/> | Drawing(s) (35 USC 113) | Total Sheets | 15 |
| 5. <input checked="" type="checkbox"/> | Oath or Declaration | Total Pages | 2 |
| a. <input type="checkbox"/> Newly executed (original or copy) | | | |
| b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))
<i>(for continuation/divisional with Box 17 completed)</i> | | | |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S)
Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). | | | |
| 6. <input type="checkbox"/> | Application Data Sheet. See 37 CFR 1.76 | | |

ADDRESS TO:
 Commissioner for Patents
 Box Patent Application
 Washington, DC 20231

- | | |
|---------------------------------------|--|
| 7. <input type="checkbox"/> | CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) |
| 8. <input type="checkbox"/> | Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary) |
| a. <input type="checkbox"/> | Computer Readable Form (CRF) |
| b. Specification Sequence Listing on: | |
| i. <input type="checkbox"/> | CD-ROM or CD-R (2 copies); or |
| ii. <input type="checkbox"/> | paper |
| c. <input type="checkbox"/> | Statements verifying identity of above copies |

ACCOMPANYING APPLICATION PARTS

- | | | |
|---|---|--|
| 9. <input type="checkbox"/> | Assignment Papers (cover sheet & document(s)) | |
| 10. <input type="checkbox"/> | 37 CFR 3.73(b) Statement
<i>(when there is an assignee)</i> | <input type="checkbox"/> Power of Attorney |
| 11. <input type="checkbox"/> | English Translation Document (if applicable) | |
| 12. <input checked="" type="checkbox"/> | Information Disclosure Statement (IDS)/PTO-1449 | <input type="checkbox"/> Copies of IDS Citations |
| 13. <input checked="" type="checkbox"/> | Preliminary Amendment | |
| 14. <input checked="" type="checkbox"/> | Return Receipt Postcard (MPEP 503)
<i>(Should be specifically itemized)</i> | |
| 15. <input type="checkbox"/> | Certified Copy of Priority Document(s)
<i>(if foreign priority is claimed)</i> | |
| 16. <input type="checkbox"/> | Other: _____ | _____ |

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation Divisional Continuation-in-part (CIP) of prior application No. 08/794,891
 Prior application information: Examiner M. Cleveland Group/Art Unit: 1762

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<input type="checkbox"/> 05514 (Insert Customer No. or Attach bar code label here)	<input type="checkbox"/> or <input type="checkbox"/> Correspondence address below
NAME _____		
Address _____		
City _____	State _____	Zip Code _____
Country _____	Telephone _____	Fax _____

+

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	1-20 =	0	X \$ 18.00 =	\$0
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	1-3 =	0	X \$ 84.00 =	\$0
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$280.00 =	\$0
				BASIC FEE (37 CFR 1.16(a))	\$740.00
				Total of above Calculations =	\$740.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				0
				TOTAL =	\$740.00

19. Small entity status

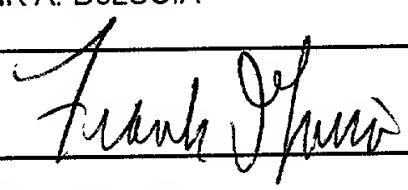
- a. A small entity statement is enclosed
- b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. Is no longer claimed.

20. A check in the amount of \$ 740.00 to cover the filing fee is enclosed.21. A check in the amount of \$ _____ to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a. Fees required under 37 CFR 1.16.
- b. Fees required under 37 CFR 1.17.
- c. Fees required under 37 CFR 1.18.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	FRANK A. DeLUCIA
SIGNATURE	 (Reg. No. 42,476)
DATE	September 28, 2001